



Laboratory Accreditation Bureau (L-A-B)

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Introduction of L-A-B

- Improving Laboratories through Accreditation since 1999
- Located in Fort Wayne, Indiana
- Specializing in Testing and Calibration Lab Accreditation
- TAG and Assessor Motto: Confidence, Competence, Communication, and Consistency

L-A-B Organization

- Doug Leonard, President/COO
- Pat Douglass, Sales Manager*
- Jason Stine, Testing Program Manager
- Zaneta Popovska, Testing Program Manager*
- Ryan Fischer, Metrology
- Randy Long, Metrology
- Kelli Jennisch, Technical Coordinator
- Linda Mumma, Office Manager
- Jessica Balyeat, Receptionist
- Sara Geist, PT Coordinator*

L-A-B Organization

- 45 Active Assessors (8 for DoD ELAP)
- 61 TAG Members
- 11 TAG Members specifically for the DoD ELAP program with a variety of backgrounds
- TAG membership is open to all Technical Advisors. Must agree with code of conduct, confidentiality and our mission

DoD ELAP Program

- ISO/IEC 17025:2005 and DoD QSM along with L-A-B Policy requirements (ILAC/APLAC/NACLA recognition requirements)
- Program has been brought into current accreditation process
- Additional DoD QSM requirements fit well in current 17025 process ... just much, much more. Sector Specific.

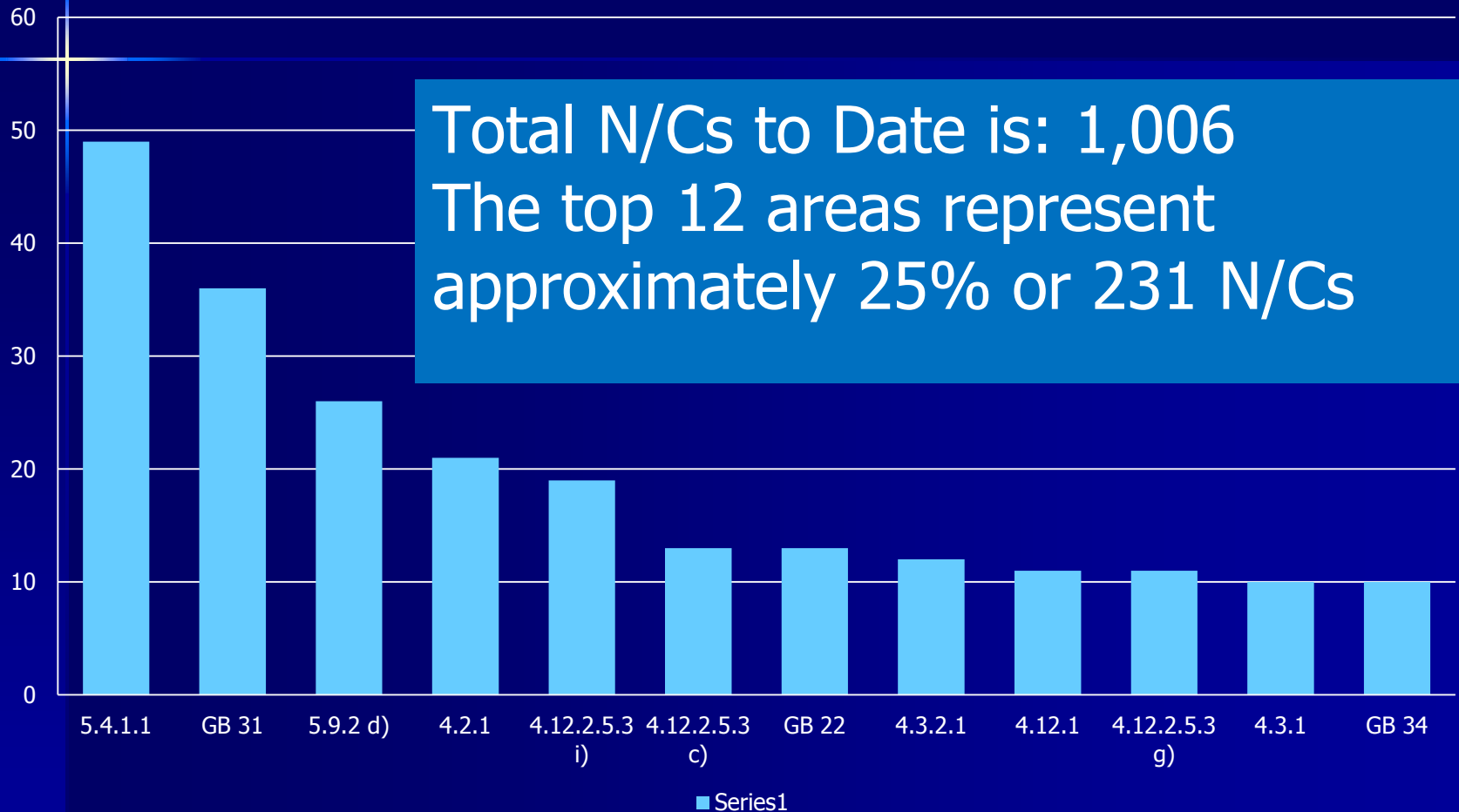
Outcome (L-A-B case)

- 83 Applications (sites) – still coming in
- 21 Sites Accredited to date
- 4 labs still in the process
- Labs have improved. Labs have proven they can and do meet the requirements. They are competent to perform environmental testing. Many have moved from compliance to continuous improvement.

Common Non-Compliances

- 5.4.1.1 – Standard Operating Procedures
- Gray Box 31 – Equipment
- 5.9.2 d) – Quality Control Protocols
- 4.2.1 – Quality System
- 4.12.2.5.3 i) – Reagent Records
- 4.12.2.5.3 c) – Instrument Records

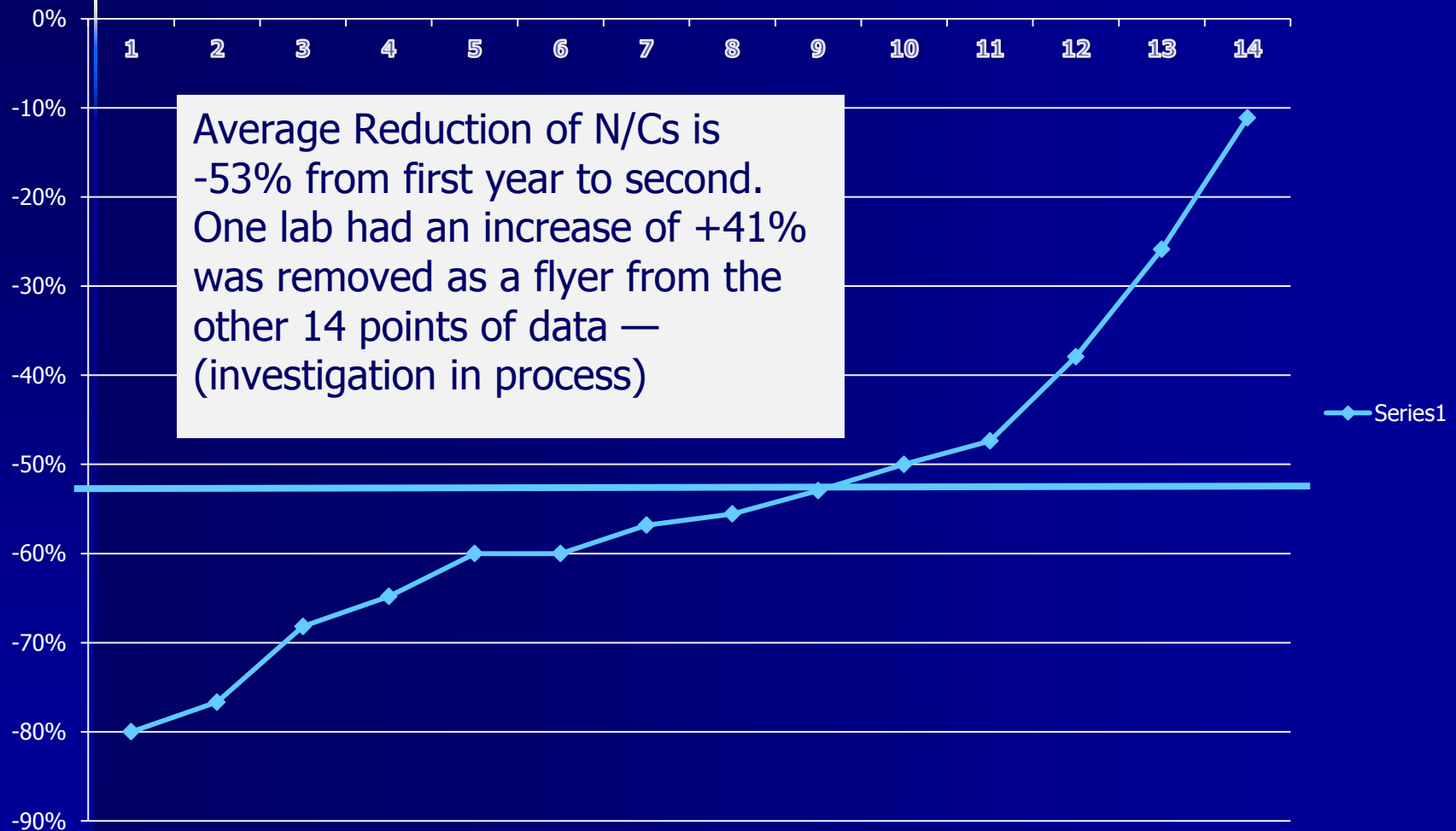
Common Non-Compliances



Program Trends

- Typically labs have reduced the number of N/Cs from 1st year to 2nd.
- Generally N/Cs have gone from traceability requirements and fundamental quality system issues to more record keeping and equipment related
- Compliance to Continuous Improvement starting

Program Trends



Complaints from the Laboratories

- Cost/Time of Assessment
- Duplicity with NELAC
- Time to Change A Scope
- Time to Get on DENIX
- Laboratory clients still not specifying current version of DoD QSM

Complaints from Assessors

- Documentation extensive to review
- Not enough time and money
- Should be able to combine with NELAC
- Need a better way of tracking PT and reporting

Complaint from a Laboratory's DoD Client

- Corrective Action sent to laboratory client from lab not adequate or appropriate for complaint
- Involved and complicated but basically;
- The root cause investigation at the laboratory did not dig deep enough

L-A-B Internal Improvements from Complaints

- Created new - streamlined internal documentation to assure efficiency in scope changes (20+) outside of normal cycle
- Created fully functioning automatic PT tracking database working with PT providers and TNI ... automatic uploading of data and tracking.

Feedback and Next Steps

- Great Feedback ("A to A+") from labs.
- Work to further our consistency within our accreditations and over all accreditations (this meeting and this week)
- Improve Laboratories through Accreditation